

Science Lab Safety Contract

Purpose- Science is a hands-on laboratory class. However, science activities may have potential hazards. We will use some equipment that may be dangerous if not handled properly. Safety in the science classroom is an important part of the scientific process. To ensure a safe classroom, a list of rules has been developed and is called the Science Lab Safety Contract. These rules must be followed at all times. Additional safety instructions will be given for each activity.

Safety Rules-

- 1) Conduct yourself in a responsible manner at all times in the science room. Horseplay, practical jokes, and pranks will not be tolerated.
- 2) Follow all written and verbal instructions carefully. Ask your teacher questions if you do not understand the instructions.
- 3) Do not touch any equipment, supplies or other materials in the science room without permission from the teacher.
- 4) Perform only authorized and approved experiments. Do not conduct any experiments when the teacher is out of the room.
- 5) Keep hands away from eyes, face and mouth while using science materials or when working with chemicals. Wash your hands with soap and water before leaving the science room.
- 6) Never eat, drink, chew gum or taste anything in the science room.
- 7) Wear safety glasses or goggles when instructed. Never remove safety glasses or goggles during an experiment. There are absolutely no exceptions to this rule!
- 8) Keep your work area and the science room neat and clean. Bring only your laboratory instructions, worksheets and writing instruments to the work area.
- 9) Clean all equipment and work areas after an experiment. Return all equipment clean and in working order to the proper storage area.
- 10) Follow your teacher's instructions to dispose of any waste materials generated in an experiment.
- 11) Report any accident (fire, spill, breakage, etc.), injury (cut, burn, etc.), or hazardous condition (broken equipment, etc.) to the teacher immediately.
- 12) Consider all chemicals used in the science room to be dangerous. Do not touch or smell chemicals unless directly instructed to do so by the teacher.
- 13) Never open storage cabinets or enter prep/storage room without permission from teacher.
- 14) Do not remove chemicals, equipment, or supplies from the science room without permission from the teacher.
- 15) Handle all glassware with care. Never pick up hot or broken glassware with your bare hands.
- 16) Use extreme caution when using matches, a burner or a hot plate. Only light burners when instructed and do not put anything into a flame unless specifically instructed to do so. Do not leave a lit burner unattended.
- 17) Dress properly—long hair must be tied back, no dangling jewelry, and no loose or baggy clothing. Wear aprons when instructed.
- 18) Learn where the safety equipment is located and how to use it. Know where the exits are located and what to do in case of an emergency or fire drill.

*Adapted from the Flinn Scientific's Middle School Science Safety Contract, 2004.

Agreement

I, _____ (student's name) have read and understand each of the above safety rules set forth in this contract. I agree to follow them to ensure not only my own safety but also of others in the science classroom or laboratory. I also agree to follow the general rules of appropriate behavior for a classroom at all times to avoid accidents and to provide a safe learning environment for everyone. I understand that if I do not follow all rules and safety precautions, I will not be allowed to participate in science activities.

Student Signature _____

Date _____

Dear Parent or Guardian,

We feel that you should be informed of the school's effort to create and maintain a safe science classroom/laboratory environment. Please read the list of safety rules. No student will be allowed to perform science activities unless this contract is signed by both the parent/guardian and the student and is on file with the teacher. Your signature on this contract indicates that you have read this Science Lab Safety Contract, reviewed it with your student, and are aware of the measures taken to ensure the safety of your son/daughter in the science classroom.

Parent/Guardian Signature _____

Date _____

Important Questions:

Does your student wear contact lenses? Yes or No

Is your student color blind? Yes or No

Does your student have any allergies other than antibiotics? Yes or No

If so, please list below.